

## EMPLOYEE SEPARATION REPORT

Facility: YOI-Davidson County Juvenile Detention

Employee Name: [REDACTED]

Job Title: Youth Development Specialist

Employee SSN: [REDACTED]

Date of Hire: 1-19-16

Current Status: Terminated

Date of Incident: 08-07-18

Recommended Discharge Date: 08-07-18

### Explanation of incident and related Standards of Conduct resulting in discharge recommendation:

Employee [REDACTED] was involved in a physical intervention with youth [REDACTED]. The incident took place on July 30<sup>th</sup>, 2018 on the Delta Living Unit. During the camera review conducted by program Administration, it was determined that employee [REDACTED] failed to properly utilize Handle with Care techniques as required. The incident was not initially reported by the youth on the date of the incident (7/31/2018) however, on 8-1-18 after learning of the alleged allegations Mr. Dallas Scott notified Child Protective Services and this incident was given an assigned case number (1063661008). Although the case is still currently being investigated by the Department of Children Service, Youth Opportunity has made the decision to separate employments based on the actions of [REDACTED] during the overall incident.

### Commendations, Recognition Awards and Disciplinary Actions (Include dates and forms of commendations, recognition awards and any disciplinary actions):

- 3/8/2017- Written Reprimand inappropriate boundaries between staff and youth.
- 5/3/2017- Introduction of Contraband, YDS Scott had her cell phone on the Alpha Living Unit.
- 7/24/2017- Lost facility keys- Keys recovered by Shift Supervisor
- 11/22/2017- Improper use of force. Failure to follow SCM approved techniques.

**Employee behavior and statement concerning incident and discharge/separation:** Employee stated that she was punching the youth in the hands not her face to stop her from choking her. Based on the camera review the employee was seen striking the youth in question however, it is unclear as to what part of the body that [REDACTED] was hitting the youth during the incident.

### Supporting Documentation to be available upon request:

<input checked="" type="checkbox"/> Counseling Memos	<input type="checkbox"/> Corrective Action Plan
<input type="checkbox"/> Performance Evaluations	<input type="checkbox"/> Investigative Reports
<input type="checkbox"/> Witness Statements	<input type="checkbox"/> Applicable Training Records

*\*Through our signatures below, we confirm we've reviewed all applicable documents and policies and procedures related to this separation request.*

Submitted By: \_\_\_\_\_

Facility Administrator/Superintendent

Date

8/10/2018

Approved by: \_\_\_\_\_

Facility HR Manager

Date

8/10/18

☐ Approved

☐ Disapproved

Corporate HR Manager

Date

Last Actual Day Worked 8-1-18

Eligible for Rehire: Yes ☐ No ☒

File original with supporting documentation in employee personnel file w/copy to Corporate HR Manager.